

Report Year:

2010

10943

Stanford Hospital

Palo Alto

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**Provide the Hospital Owner and Year of Report per Section 130061(e)**

Facility Number:

10943

Facility Name:

Stanford Hospital

Address:

300 Pasteur Drive

City:

Palo Alto

Hospital Owner/Licensee:

Stanford University Medical Center

Year of Reporting:

2010

Contact 1 e-mail Address:

Contact 2 e-mail Address:

Contact 3 e-mail Address::

Name of Submitter:

Carlos Villalva

Submission Date:

1/19/2011 2:05:51 PM

For buildings which are planned for retrofit or replacement the report shall identify: Whether the hospital owner intends to retrofit or replace the building to SPC 2 or SPC 5 per section 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
02	Central Core - East and West	300 Pasteur Drive	Remove	N/A		01/01/2018
03	Boswell Building	300 Pasteur Drive	Remove	N/A		01/01/2018
15	Lane Building - Med School	300 Pasteur Drive	Remove	N/A		01/01/2018
16	Edwards Building-Med School	300 Pasteur Drive	Remove	N/A		01/01/2018
17	Alway Building - Med School	300 Pasteur Drive	Remove	N/A		01/01/2018
18	Grant Building - Med School	300 Pasteur Drive	Remove	N/A		01/01/2018
21	Cooling Tower #3	300 Pasteur Drive	Retrofit	SPC5		01/01/2018
23	Cooling Tower #1	300 Pasteur Drive	Retrofit	SPC5		01/01/2018
24	Cooling Tower #2	300 Pasteur Drive	Retrofit	SPC5		01/01/2018

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For each building which is planned for retrofitting or replacement, provide the project numbers, per [Section 130061\(c\)\(1\)\(C\)](#). The projected construction start date or dates and projected Completion date or dates per [Section 130061\(c\)\(1\)\(D\)](#) and the most recent project status and approvals per [Section 130061\(c\)\(1\)\(E\)](#).

Building No:		23	Cooling Tower #1				Retrofit/Replacement Project:		Yes-Submitted	
Facility Number	Project Number	Sub Num	Scope	Date in	Plan Approved Date	Proj. Start Date	Proj. Completed Date	Status	CEQA Review	
10943	HS091257	0	CEF COOLING TOWERS 1 AND 2 SB 1953 SEISMIC UPGRADE	07/23/2009		03/01/2011	12/31/2012	OPEN	No	

Building No:		24	Cooling Tower #2				Retrofit/Replacement Project:		Yes-Submitted	
Facility Number	Project Number	Sub Num	Scope	Date in	Plan Approved Date	Proj. Start Date	Proj. Completed Date	Status	CEQA Review	
10943	HS091257	0	CEF COOLING TOWERS 1 AND 2 SB 1953 SEISMIC UPGRADE	07/23/2009		03/01/2011	12/31/2012	OPEN	No	

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 02

Building Name: Central Core - East and West

**Type of Service Provided**
☐ Nursing Inpatient Beds 0 Inpatient Days 0

☐ IntensiveCare Inpatient Beds 0 Inpatient Days 0

☐ Pediatric/Adol  
escent Inpatient Beds 0 Inpatient Days 0

☐ Psychiatric  
Nursing Inpatient Beds 0 Inpatient Days 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0 Inpatient Days 0

☐ Intermediate  
Care Inpatient Beds 0 Inpatient Days 0

☐ Skilled Nursing Inpatient Beds 0 Inpatient Days 0

Total Beds this Building 0

☐ Surgical

☐ Obstetrical  
Recovery

☐ Anesthesia

☐ Newborn/  
WellBaby

☒ Clinical Lab

☐ Emergency

☐ Radiological/  
Imaging

☐ Nuclear  
Medicine

☐ Pharmaceutical

☐ Dietetic

☐ Rehabilitation  
Therapy

☒ Administration

☐ Renal Dialysis

☒ Support  
Services

☐ Outpatient  
Surgery

☐ Obstetrical  
Cesarean/Deliv

☐ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 03

Building Name: Boswell Building

**Type of Service Provided**
☐ Nursing Inpatient Beds 0 Inpatient Days 0

☐ IntensiveCare Inpatient Beds 0 Inpatient Days 0

☐ Pediatric/Adol  
escent Inpatient Beds 0 Inpatient Days 0

☐ Psychiatric Nursing Inpatient Beds 0 Inpatient Days 0

☐ Obstetrical Ante/Postprtum Inpatient Beds 0 Inpatient Days 0

☐ Intermediate Care Inpatient Beds 0 Inpatient Days 0

☐ Skilled Nursing Inpatient Beds 0 Inpatient Days 0

Total Beds this Building 0

☐ Surgical

☐ Obstetrical Recovery

☐ Anesthesia

☐ Newborn/WellBaby

☐ Clinical Lab

☐ Emergency

☐ Radiological/  
Imaging

☐ Nuclear Medicine

☐ Pharmaceutical

☐ Dietetic

☐ Rehabilitation Therapy

☒ Administration

☐ Renal Dialysis

☒ Support Services

☐ Outpatient Surgery

☐ Obstetrical  
Cesarean/Deliv

☐ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 15

Building Name: Lane Building - Med School

**Type of Service Provided**
☐ Nursing Inpatient Beds  Inpatient Days 
☐ IntensiveCare Inpatient Beds  Inpatient Days 
☐ Pediatric/Adol  
escent Inpatient Beds  Inpatient Days 
☐ Psychiatric Nursing Inpatient Beds  Inpatient Days 
☐ Obstetrical Ante/Postprtum Inpatient Beds  Inpatient Days 
☐ Intermediate Care Inpatient Beds  Inpatient Days 
☐ Skilled Nursing Inpatient Beds  Inpatient Days 
Total Beds this Building ☐ Surgical☐ Obstetrical Recovery☐ Anesthesia☐ Newborn/  
WellBaby☐ Clinical Lab☐ Emergency☐ Radiological/  
Imaging☐ Nuclear  
Medicine☐ Pharmaceutical☐ Dietetic☐ Rehabilitation  
Therapy☐ Administration☐ Renal Dialysis☐ Support  
Services☐ Outpatient  
Surgery☐ Obstetrical  
Cesarean/Deliv☐ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 16

Building Name: Edwards Building-Med School

**Type of Service Provided**
☐ Nursing Inpatient Beds  Inpatient Days 
☐ IntensiveCare Inpatient Beds  Inpatient Days 
☐ Pediatric/Adol  
escent Inpatient Beds  Inpatient Days 
☐ Psychiatric Nursing Inpatient Beds  Inpatient Days 
☐ Obstetrical Ante/Postprtum Inpatient Beds  Inpatient Days 
☐ Intermediate Care Inpatient Beds  Inpatient Days 
☐ Skilled Nursing Inpatient Beds  Inpatient Days 
Total Beds this Building ☐ Surgical☐ Obstetrical Recovery☐ Anesthesia☐ Newborn/  
WellBaby☐ Clinical Lab☐ Emergency☐ Radiological/  
Imaging☐ Nuclear  
Medicine☐ Pharmaceutical☐ Dietetic☐ Rehabilitation  
Therapy☐ Administration☐ Renal Dialysis☐ Support  
Services☐ Outpatient  
Surgery☐ Obstetrical  
Cesarean/Deliv☐ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 17

Building Name: Always Building - Med School

**Type of Service Provided**
☐ Nursing Inpatient Beds  Inpatient Days 
☐ IntensiveCare Inpatient Beds  Inpatient Days 
☐ Pediatric/Adol  
escent Inpatient Beds  Inpatient Days 
☐ Psychiatric Nursing Inpatient Beds  Inpatient Days 
☐ Obstetrical Ante/Postprtum Inpatient Beds  Inpatient Days 
☐ Intermediate Care Inpatient Beds  Inpatient Days 
☐ Skilled Nursing Inpatient Beds  Inpatient Days 
Total Beds this Building ☐ Surgical☐ Obstetrical Recovery☐ Anesthesia☐ Newborn/  
WellBaby☐ Clinical Lab☐ Emergency☐ Radiological/  
Imaging☐ Nuclear  
Medicine☐ Pharmaceutical☐ Dietetic☐ Rehabilitation  
Therapy☐ Administration☐ Renal Dialysis☐ Support  
Services☐ Outpatient  
Surgery☐ Obstetrical  
Cesarean/Deliv☐ Central Plant



Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 18

Building Name: Grant Building - Med School

**Type of Service Provided**
☐ Nursing Inpatient Beds  Inpatient Days 
☐ IntensiveCare Inpatient Beds  Inpatient Days 
☐ Pediatric/Adol  
escent Inpatient Beds  Inpatient Days 
☐ Psychiatric Nursing Inpatient Beds  Inpatient Days 
☐ Obstetrical Ante/Postprtum Inpatient Beds  Inpatient Days 
☐ Intermediate Care Inpatient Beds  Inpatient Days 
☐ Skilled Nursing Inpatient Beds  Inpatient Days 
Total Beds this Building ☐ Surgical☐ Obstetrical Recovery☐ Anesthesia☐ Newborn/  
WellBaby☐ Clinical Lab☐ Emergency☐ Radiological/  
Imaging☐ Nuclear  
Medicine☐ Pharmaceutical☐ Dietetic☐ Rehabilitation  
Therapy☐ Administration☐ Renal Dialysis☐ Support  
Services☐ Outpatient  
Surgery☐ Obstetrical  
Cesarean/Deliv☐ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 20

Building Name: Boiler Building

**Type of Service Provided**
☐ Nursing Inpatient Beds 0 Inpatient Days 0

☐ IntensiveCare Inpatient Beds 0 Inpatient Days 0

☐ Pediatric/Adol  
escent Inpatient Beds 0 Inpatient Days 0

☐ Psychiatric Nursing Inpatient Beds 0 Inpatient Days 0

☐ Obstetrical Ante/Postprtum Inpatient Beds 0 Inpatient Days 0

☐ Intermediate Care Inpatient Beds 0 Inpatient Days 0

☐ Skilled Nursing Inpatient Beds 0 Inpatient Days 0

Total Beds this Building 0

☐ Surgical

☐ Obstetrical Recovery

☐ Anesthesia

☐ Newborn/  
WellBaby

☐ Clinical Lab

☐ Emergency

☐ Radiological/  
Imaging

☐ Nuclear  
Medicine

☐ Pharmaceutical

☐ Dietetic

☐ Rehabilitation  
Therapy

☐ Administration

☐ Renal Dialysis

☐ Support  
Services

☐ Outpatient  
Surgery

☐ Obstetrical  
Cesarean/Deliv

☒ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 20A

Building Name: Boiler Building - Office Portion

**Type of Service Provided**
☐ Nursing Inpatient Beds  Inpatient Days 
☐ IntensiveCare Inpatient Beds  Inpatient Days 
☐ Pediatric/Adol  
escent Inpatient Beds  Inpatient Days 
☐ Psychiatric Nursing Inpatient Beds  Inpatient Days 
☐ Obstetrical Ante/Postprtum Inpatient Beds  Inpatient Days 
☐ Intermediate Care Inpatient Beds  Inpatient Days 
☐ Skilled Nursing Inpatient Beds  Inpatient Days 
Total Beds this Building ☐ Surgical☐ Obstetrical Recovery☐ Anesthesia☐ Newborn/  
WellBaby☐ Clinical Lab☐ Emergency☐ Radiological/  
Imaging☐ Nuclear  
Medicine☐ Pharmaceutical☐ Dietetic☐ Rehabilitation  
Therapy☐ Administration☐ Renal Dialysis☐ Support  
Services☐ Outpatient  
Surgery☐ Obstetrical  
Cesarean/Deliv☒ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 21

Building Name: Cooling Tower #3

**Type of Service Provided**
☐ Nursing Inpatient Beds  Inpatient Days 
☐ IntensiveCare Inpatient Beds  Inpatient Days 
☐ Pediatric/Adol  
escent Inpatient Beds  Inpatient Days 
☐ Psychiatric Nursing Inpatient Beds  Inpatient Days 
☐ Obstetrical Ante/Postprtum Inpatient Beds  Inpatient Days 
☐ Intermediate Care Inpatient Beds  Inpatient Days 
☐ Skilled Nursing Inpatient Beds  Inpatient Days 
Total Beds this Building ☐ Surgical☐ Obstetrical Recovery☐ Anesthesia☐ Newborn/WellBaby☐ Clinical Lab☐ Emergency☐ Radiological/  
Imaging☐ Nuclear Medicine☐ Pharmaceutical☐ Dietetic☐ Rehabilitation Therapy☐ Administration☐ Renal Dialysis☐ Support Services☐ Outpatient Surgery☐ Obstetrical Cesarean/Deliv☒ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 23

Building Name: Cooling Tower #1

**Type of Service Provided**
☐ Nursing Inpatient Beds  Inpatient Days 
☐ IntensiveCare Inpatient Beds  Inpatient Days 
☐ Pediatric/Adol  
escent Inpatient Beds  Inpatient Days 
☐ Psychiatric Nursing Inpatient Beds  Inpatient Days 
☐ Obstetrical Ante/Postprtum Inpatient Beds  Inpatient Days 
☐ Intermediate Care Inpatient Beds  Inpatient Days 
☐ Skilled Nursing Inpatient Beds  Inpatient Days 
Total Beds this Building ☐ Surgical☐ Obstetrical Recovery☐ Anesthesia☐ Newborn/  
WellBaby☐ Clinical Lab☐ Emergency☐ Radiological/  
Imaging☐ Nuclear  
Medicine☐ Pharmaceutical☐ Dietetic☐ Rehabilitation  
Therapy☐ Administration☐ Renal Dialysis☐ Support  
Services☐ Outpatient  
Surgery☐ Obstetrical  
Cesarean/Deliv☒ Central Plant

Provide the number of inpatient beds and patient days per type of service per building per **Section 130061(c)(1)(F)**

Building Number: 24

Building Name: Cooling Tower #2

**Type of Service Provided**
☐ Nursing Inpatient Beds  Inpatient Days 
☐ IntensiveCare Inpatient Beds  Inpatient Days 
☐ Pediatric/Adol  
escent Inpatient Beds  Inpatient Days 
☐ Psychiatric  
Nursing Inpatient Beds  Inpatient Days 
☐ Obstetrical  
Ante/Postprtum Inpatient Beds  Inpatient Days 
☐ Intermediate  
Care Inpatient Beds  Inpatient Days 
☐ Skilled Nursing Inpatient Beds  Inpatient Days 
Total Beds this Building ☐ Surgical☐ Obstetrical  
Recovery☐ Anesthesia☐ Newborn/  
WellBaby☐ Clinical Lab☐ Emergency☐ Radiological/  
Imaging☐ Nuclear  
Medicine☐ Pharmaceutical☐ Dietetic☐ Rehabilitation  
Therapy☐ Administration☐ Renal Dialysis☐ Support  
Services☐ Outpatient  
Surgery☐ Obstetrical  
Cesarean/Deliv☒ Central Plant

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 02

Building Name: Central Core - East and West

**Medical / Surgical (Include GYN)**

Inpatient Bed 0 Inpatient Days 0

**Acute Respiratory Care**

Inpatient Bed 0 Inpatient Days 0

**Acute Psychiatric**

Inpatient Bed 0 Inpatient Days 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed 0 Inpatient Days 0

**Burn**

Inpatient Bed 0 Inpatient Days 0

**Skilled Nursing**

Inpatient Bed 0 Inpatient Days 0

**Pediatric**

Inpatient Bed 0 Inpatient Days 0

**intensive Care Newborn Nursery**

Inpatient Bed 0 Inpatient Days 0

**Intermediate Card**

Inpatient Bed 0 Inpatient Days 0

**Intensive Care**

Inpatient Bed 0 Inpatient Days 0

**Rehabilitation Center**

Inpatient Bed 0 Inpatient Days 0

**Int. Care / development Disabled**

Inpatient Bed 0 Inpatient Days 0

**Coronary Care**

Inpatient Bed 0 Inpatient Days 0

**Chemical Dependency**

Inpatient Bed 0 Inpatient Days 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 03

Building Name: Boswell Building

**Medical / Surgical (Include GYN)**

Inpatient Bed 0 Inpatient Days 0

**Acute Respiratory Care**

Inpatient Bed 0 Inpatient Days 0

**Acute Psychiatric**

Inpatient Bed 0 Inpatient Days 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed 0 Inpatient Days 0

**Burn**

Inpatient Bed 0 Inpatient Days 0

**Skilled Nursing**

Inpatient Bed 0 Inpatient Days 0

**Pediatric**

Inpatient Bed 0 Inpatient Days 0

**intensive Care Newborn Nursery**

Inpatient Bed 0 Inpatient Days 0

**Intermediate Card**

Inpatient Bed 0 Inpatient Days 0

**Intensive Care**

Inpatient Bed 0 Inpatient Days 0

**Rehabilitation Center**

Inpatient Bed 0 Inpatient Days 0

**Int. Care / development Disabled**

Inpatient Bed 0 Inpatient Days 0

**Coronary Care**

Inpatient Bed 0 Inpatient Days 0

**Chemical Dependency**

Inpatient Bed 0 Inpatient Days 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0



Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:

15

Building Name:

Lane Building - Med School

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 16

Building Name: Edwards Building-Med School

**Medical / Surgical (Include GYN)**

Inpatient Bed 0 Inpatient Days 0

**Acute Respiratory Care**

Inpatient Bed 0 Inpatient Days 0

**Acute Psychiatric**

Inpatient Bed 0 Inpatient Days 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed 0 Inpatient Days 0

**Burn**

Inpatient Bed 0 Inpatient Days 0

**Skilled Nursing**

Inpatient Bed 0 Inpatient Days 0

**Pediatric**

Inpatient Bed 0 Inpatient Days 0

**intensive Care Newborn Nursery**

Inpatient Bed 0 Inpatient Days 0

**Intermediate Card**

Inpatient Bed 0 Inpatient Days 0

**Intensive Care**

Inpatient Bed 0 Inpatient Days 0

**Rehabilitation Center**

Inpatient Bed 0 Inpatient Days 0

**Int. Care / development Disabled**

Inpatient Bed 0 Inpatient Days 0

**Coronary Care**

Inpatient Bed 0 Inpatient Days 0

**Chemical Dependency**

Inpatient Bed 0 Inpatient Days 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:

17

Building Name:

Alway Building - Med School

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 18

Building Name: Grant Building - Med School

**Medical / Surgical (Include GYN)**

Inpatient Bed 0 Inpatient Days 0

**Acute Respiratory Care**

Inpatient Bed 0 Inpatient Days 0

**Acute Psychiatric**

Inpatient Bed 0 Inpatient Days 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed 0 Inpatient Days 0

**Burn**

Inpatient Bed 0 Inpatient Days 0

**Skilled Nursing**

Inpatient Bed 0 Inpatient Days 0

**Pediatric**

Inpatient Bed 0 Inpatient Days 0

**intensive Care Newborn Nursery**

Inpatient Bed 0 Inpatient Days 0

**Intermediate Card**

Inpatient Bed 0 Inpatient Days 0

**Intensive Care**

Inpatient Bed 0 Inpatient Days 0

**Rehabilitation Center**

Inpatient Bed 0 Inpatient Days 0

**Int. Care / development Disabled**

Inpatient Bed 0 Inpatient Days 0

**Coronary Care**

Inpatient Bed 0 Inpatient Days 0

**Chemical Dependency**

Inpatient Bed 0 Inpatient Days 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 20

Building Name: Boiler Building

**Medical / Surgical (Include GYN)**

Inpatient Bed 0 Inpatient Days 0

**Acute Respiratory Care**

Inpatient Bed 0 Inpatient Days 0

**Acute Psychiatric**

Inpatient Bed 0 Inpatient Days 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed 0 Inpatient Days 0

**Burn**

Inpatient Bed 0 Inpatient Days 0

**Skilled Nursing**

Inpatient Bed 0 Inpatient Days 0

**Pediatric**

Inpatient Bed 0 Inpatient Days 0

**intensive Care Newborn Nursery**

Inpatient Bed 0 Inpatient Days 0

**Intermediate Card**

Inpatient Bed 0 Inpatient Days 0

**Intensive Care**

Inpatient Bed 0 Inpatient Days 0

**Rehabilitation Center**

Inpatient Bed 0 Inpatient Days 0

**Int. Care / development Disabled**

Inpatient Bed 0 Inpatient Days 0

**Coronary Care**

Inpatient Bed 0 Inpatient Days 0

**Chemical Dependency**

Inpatient Bed 0 Inpatient Days 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0

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2010

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Palo Alto

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:

20A

Building Name:

Boiler Building - Office Portion

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:

21

Building Name:

Cooling Tower #3

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 23

Building Name: Cooling Tower #1

**Medical / Surgical (Include GYN)**

Inpatient Bed 0 Inpatient Days 0

**Acute Respiratory Care**

Inpatient Bed 0 Inpatient Days 0

**Acute Psychiatric**

Inpatient Bed 0 Inpatient Days 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed 0 Inpatient Days 0

**Burn**

Inpatient Bed 0 Inpatient Days 0

**Skilled Nursing**

Inpatient Bed 0 Inpatient Days 0

**Pediatric**

Inpatient Bed 0 Inpatient Days 0

**intensive Care Newborn Nursery**

Inpatient Bed 0 Inpatient Days 0

**Intermediate Card**

Inpatient Bed 0 Inpatient Days 0

**Intensive Care**

Inpatient Bed 0 Inpatient Days 0

**Rehabilitation Center**

Inpatient Bed 0 Inpatient Days 0

**Int. Care / development Disabled**

Inpatient Bed 0 Inpatient Days 0

**Coronary Care**

Inpatient Bed 0 Inpatient Days 0

**Chemical Dependency**

Inpatient Bed 0 Inpatient Days 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0



Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 24

Building Name: Cooling Tower #2

**Medical / Surgical (Include GYN)**

Inpatient Bed 0 Inpatient Days 0

**Acute Respiratory Care**

Inpatient Bed 0 Inpatient Days 0

**Acute Psychiatric**

Inpatient Bed 0 Inpatient Days 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed 0 Inpatient Days 0

**Burn**

Inpatient Bed 0 Inpatient Days 0

**Skilled Nursing**

Inpatient Bed 0 Inpatient Days 0

**Pediatric**

Inpatient Bed 0 Inpatient Days 0

**intensive Care Newborn Nursery**

Inpatient Bed 0 Inpatient Days 0

**Intermediate Card**

Inpatient Bed 0 Inpatient Days 0

**Intensive Care**

Inpatient Bed 0 Inpatient Days 0

**Rehabilitation Center**

Inpatient Bed 0 Inpatient Days 0

**Int. Care / development Disabled**

Inpatient Bed 0 Inpatient Days 0

**Coronary Care**

Inpatient Bed 0 Inpatient Days 0

**Chemical Dependency**

Inpatient Bed 0 Inpatient Days 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0

For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed
01	Central Core	<input type="checkbox"/>
02	Central Core - East and West	<input checked="" type="checkbox"/>
03	Boswell Building	<input checked="" type="checkbox"/>
04	West Pavilion	<input type="checkbox"/>
05	East Pavilion	<input type="checkbox"/>
06	Phase 1 Central Core Expansion	<input type="checkbox"/>
07	Nursing Pod D	<input type="checkbox"/>
08	Nursing Pod E	<input type="checkbox"/>
09	Nursing Pod F	<input type="checkbox"/>
10	Diagnostic Treatment Center	<input type="checkbox"/>
11	Atrium	<input type="checkbox"/>
12	F Pod Extension	<input type="checkbox"/>
13	NMR Building	<input type="checkbox"/>
15	Lane Building - Med School	<input checked="" type="checkbox"/>
16	Edwards Building-Med School	<input checked="" type="checkbox"/>
17	Alway Building - Med School	<input checked="" type="checkbox"/>
18	Grant Building - Med School	<input checked="" type="checkbox"/>
19	Cogen Building	<input type="checkbox"/>

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19A

Cogen Building - Office & Control R

20

Boiler Building

20A

Boiler Building - Office Portion

21

Cooling Tower #3

22

Cooling Tower #4

23

Cooling Tower #1

24

Cooling Tower #2

☐☐☐☐☐☐☐

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List ALL proposed new buildings to be constructd at this or another site.

Building  
Number

Building Name

New  
Site

N\_1

New Stanford Hospital Bldg

X

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

02

Building  
Name:

Central Core - East and West

Year of  
Information:

2008

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds

☐ IntensiveCare Inpatient Beds

☐ Pediatric/Adol  
escent Inpatient Beds

☐ Psychiatric Inpatient  
Nursing Beds

☐ Obstetrical Inpatient  
Ante/Postprtum Beds

☐ Intermediate Inpatient  
Care Beds

☐ Skilled Nursing Inpatient  
Beds

Total Beds this  
Building

☐ Surgical

☐ Anesthesia

☒ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

02

Building  
Name:

Central Core - East and West

Year of  
Information:

2009

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric Inpatient  
Nursing Beds 0

☐ Obstetrical Inpatient  
Ante/Postprtum Beds 0

☐ Intermediate Inpatient  
Care Beds 0

☐ Skilled Nursing Inpatient  
Beds 0

Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☒ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

02

Building  
Name:

Central Core - East and West

Year of  
Information:

2010

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric Inpatient  
Nursing Beds 0

☐ Obstetrical Inpatient  
Ante/Postprtum Beds 0

☐ Intermediate Inpatient  
Care Beds 0

☐ Skilled Nursing Inpatient  
Beds 0

Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☒ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

03

Building  
Name:

Boswell Building

Year of  
Information:

2008

Information Current As  
Of:

01/10/2011

Type of Services  
Provided

☐

Nursing

Inpatient  
Beds

0

☐

IntensiveCare

Inpatient  
Beds

0

☐

Pediatric/Adol  
escent

Inpatient  
Beds

0

☐

Psychiatric  
Nursing

Inpatient  
Beds

0

☐

Obstetrical  
Ante/Postprtum

Inpatient  
Beds

0

☐

Intermediate  
Care

Inpatient  
Beds

0

☐

Skilled Nursing

Inpatient  
Beds

0

Total Beds this  
Building

0

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐

Radiological/  
Imaging

☐

Pharmaceutical

☐

Dietetic

☒

Administration

☐

Obstetrical  
Cesarean/Deliv

☐

Obstetrical  
Recovery

☐

Newborn/  
WellBaby

☐

Emergency

☐

Nuclear  
Medicine

☐

Rehabilitation  
Therapy

☐

Renal Dialysis

☐

Outpatient  
Surgery

☐

Central Plant

☒

Support  
Services



Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

03

Building  
Name:

Boswell Building

Year of  
Information:

2009

Information Current As  
Of:

01/10/2011

Type of Services  
Provided

☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric Inpatient  
Nursing Beds 0

☐ Obstetrical Inpatient  
Ante/Postprtum Beds 0

☐ Intermediate Inpatient  
Care Beds 0

☐ Skilled Nursing Inpatient  
Beds 0

Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

03

Building  
Name:

Boswell Building

Year of  
Information:

2010

Information Current As  
Of:

01/10/2011

Type of Services  
Provided

☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric Inpatient  
Nursing Beds 0

☐ Obstetrical Inpatient  
Ante/Postprtum Beds 0

☐ Intermediate Inpatient  
Care Beds 0

☐ Skilled Nursing Inpatient  
Beds 0

Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

15

Building  
Name:

Lane Building - Med School

Year of  
Information:

2008

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds

☐ IntensiveCare Inpatient Beds

☐ Pediatric/Adol  
escent Inpatient Beds

☐ Psychiatric Inpatient  
Nursing Beds

☐ Obstetrical Inpatient  
Ante/Postprtum Beds

☐ Intermediate Inpatient  
Care Beds

☐ Skilled Nursing Inpatient  
Beds

Total Beds this  
Building

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

15

Building  
Name:

Lane Building - Med School

Year of  
Information:

2009

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds

☐ IntensiveCare Inpatient Beds

☐ Pediatric/Adol  
escent Inpatient Beds

☐ Psychiatric Inpatient  
Nursing Beds

☐ Obstetrical Inpatient  
Ante/Postprtum Beds

☐ Intermediate Inpatient  
Care Beds

☐ Skilled Nursing Inpatient  
Beds

Total Beds this  
Building

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

15

Building  
Name:

Lane Building - Med School

Year of  
Information:

2010

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric Inpatient  
Nursing Beds 0

☐ Obstetrical Inpatient  
Ante/Postprtum Beds 0

☐ Intermediate Inpatient  
Care Beds 0

☐ Skilled Nursing Inpatient  
Beds 0

Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

16

Building  
Name:

Edwards Building-Med School

Year of  
Information:

2008

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing

Inpatient  
Beds

0

☐ IntensiveCare

Inpatient  
Beds

0

☐ Pediatric/Adol  
escent

Inpatient  
Beds

0

☐ Psychiatric  
Nursing

Inpatient  
Beds

0

☐ Obstetrical  
Ante/Postprtum

Inpatient  
Beds

0

☐ Intermediate  
Care

Inpatient  
Beds

0

☐ Skilled Nursing

Inpatient  
Beds

0

Total Beds this  
Building

0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

16

Building  
Name:

Edwards Building-Med School

Year of  
Information:

2009

Information Current As  
Of:

10/11/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds

☐ IntensiveCare Inpatient Beds

☐ Pediatric/Adol  
escent Inpatient Beds

☐ Psychiatric Inpatient  
Nursing Beds

☐ Obstetrical Inpatient  
Ante/Postprtum Beds

☐ Intermediate Inpatient  
Care Beds

☐ Skilled Nursing Inpatient  
Beds

Total Beds this  
Building

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

16

Building  
Name:

Edwards Building-Med School

Year of  
Information:

2010

Information Current As  
Of:

10/11/2010

Type of Services  
Provided

☐

Nursing

Inpatient  
Beds

0

☐

IntensiveCare

Inpatient  
Beds

0

☐

Pediatric/Adol  
escent

Inpatient  
Beds

0

☐

Psychiatric  
Nursing

Inpatient  
Beds

0

☐

Obstetrical  
Ante/Postprtum

Inpatient  
Beds

0

☐

Intermediate  
Care

Inpatient  
Beds

0

☐

Skilled Nursing

Inpatient  
Beds

0

Total Beds this  
Building

0

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐

Radiological/  
Imaging

☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐

Obstetrical  
Cesarean/Deliv

☐

Obstetrical  
Recovery

☐

Newborn/  
WellBaby

☐

Emergency

☐

Nuclear  
Medicine

☐

Rehabilitation  
Therapy

☐

Renal Dialysis

☐

Outpatient  
Surgery

☐

Central Plant

☐

Support  
Services



Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

17

Building  
Name:

Alway Building - Med School

Year of  
Information:

2008

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing

Inpatient  
Beds

0

☐ IntensiveCare

Inpatient  
Beds

0

☐ Pediatric/Adol  
escent

Inpatient  
Beds

0

☐ Psychiatric  
Nursing

Inpatient  
Beds

0

☐ Obstetrical  
Ante/Postprtum

Inpatient  
Beds

0

☐ Intermediate  
Care

Inpatient  
Beds

0

☐ Skilled Nursing

Inpatient  
Beds

0

Total Beds this  
Building

0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

17

Building  
Name:

Alway Building - Med School

Year of  
Information:

2009

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric Inpatient  
Nursing Beds 0

☐ Obstetrical Inpatient  
Ante/Postprtum Beds 0

☐ Intermediate Inpatient  
Care Beds 0

☐ Skilled Nursing Inpatient  
Beds 0

Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

17

Building  
Name:

Alway Building - Med School

Year of  
Information:

2010

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds

☐ IntensiveCare Inpatient Beds

☐ Pediatric/Adol  
escent Inpatient Beds

☐ Psychiatric Inpatient  
Nursing Beds

☐ Obstetrical Inpatient  
Ante/Postprtum Beds

☐ Intermediate Inpatient  
Care Beds

☐ Skilled Nursing Inpatient  
Beds

Total Beds this  
Building

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

18

Building  
Name:

Grant Building - Med School

Year of  
Information:

2008

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing

Inpatient  
Beds

0

☐ IntensiveCare

Inpatient  
Beds

0

☐ Pediatric/Adol  
escent

Inpatient  
Beds

0

☐ Psychiatric  
Nursing

Inpatient  
Beds

0

☐ Obstetrical  
Ante/Postprtum

Inpatient  
Beds

0

☐ Intermediate  
Care

Inpatient  
Beds

0

☐ Skilled Nursing

Inpatient  
Beds

0

Total Beds this  
Building

0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

18

Building  
Name:

Grant Building - Med School

Year of  
Information:

2009

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds

☐ IntensiveCare Inpatient Beds

☐ Pediatric/Adol  
escent Inpatient Beds

☐ Psychiatric Inpatient  
Nursing Beds

☐ Obstetrical Inpatient  
Ante/Postprtum Beds

☐ Intermediate Inpatient  
Care Beds

☐ Skilled Nursing Inpatient  
Beds

Total Beds this  
Building

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Provide the number of inpatient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building  
Number:

18

Building  
Name:

Grant Building - Med School

Year of  
Information:

2010

Information Current As  
Of:

10/12/2010

Type of Services  
Provided

☐ Nursing Inpatient Beds

☐ IntensiveCare Inpatient Beds

☐ Pediatric/Adol  
escent Inpatient Beds

☐ Psychiatric Inpatient  
Nursing Beds

☐ Obstetrical Inpatient  
Ante/Postprtum Beds

☐ Intermediate Inpatient  
Care Beds

☐ Skilled Nursing Inpatient  
Beds

Total Beds this  
Building

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

For the building or buildings to be removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per [Section 130061 \(c\)\(2\)\(A\)](#)

The planned uses of the building or buildings to be removed from acute care service per [Section 130061\(c\)\(2\)\(B\)](#)

The inpatient service currently delivered in the building or buildings per [Section 130061\(c\)\(20\)\(C\)](#)

Building Number:

01

Central Core

Removal  
Date:

01/01/2030

Planned Uses for the building to be removed from acute care service:

Planned use for building:

Medical Office Building

Jurisdiction:

OSHPD

Inpatient services currently delivered in the building:

☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☒

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐Nuclear  
Medicine☐Support  
Services☐Intermediate  
Care☒

Dietetic

☒Nuclear  
Medicine☒Support  
Services☐

Skilled Nursing

☒

Administration

For the building or buildings to be removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per [Section 130061 \(c\)\(2\)\(A\)](#)

The planned uses of the building or buildings to be removed from acute care service per [Section 130061\(c\)\(2\)\(B\)](#)

The inpatient service currently delivered in the building or buildings per [Section 130061\(c\)\(20\)\(C\)](#)

Building Number:

02

Central Core - East and West

Removal  
Date:

01/01/2018

Planned Uses for the building to be removed from acute care service:

Planned use for building:

Medical Office Building

Jurisdiction:

OSHPD

Inpatient services currently delivered in the building:

☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☒

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐Intermediate  
Care☐

Dietetic

☐Nuclear  
Medicine☒Support  
Services☐

Skilled Nursing

☒

Administration



For the building or buildings to be removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per [Section 130061 \(c\)\(2\)\(A\)](#)

The planned uses of the building or buildings to be removed from acute care service per [Section 130061\(c\)\(2\)\(B\)](#)

The inpatient service currently delivered in the building or buildings per [Section 130061\(c\)\(20\)\(C\)](#)

Building Number:

03

Boswell Building

Removal  
Date:

01/01/2018

Planned Uses for the building to be removed from acute care service:

Planned use for building:

Medical Office Building

Jurisdiction:

OSHPD

Inpatient services currently delivered in the building:

☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☒

Administration

☐Nuclear  
Medicine☒Support  
Services

For the building or buildings to be removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per [Section 130061 \(c\)\(2\)\(A\)](#)

The planned uses of the building or buildings to be removed from acute care service per [Section 130061\(c\)\(2\)\(B\)](#)

The inpatient service currently delivered in the building or buildings per [Section 130061\(c\)\(20\)\(C\)](#)

Building Number:

04

West Pavilion

Removal  
Date:

01/01/2030

Planned Uses for the building to be removed from acute care service:

Planned use for building:

Medical Office Building

Jurisdiction:

OSHPD

Inpatient services currently delivered in the building:

☒

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐Nuclear  
Medicine☐Support  
Services☒Intermediate  
Care☐

Dietetic

☐Nuclear  
Medicine☒Support  
Services☐

Skilled Nursing

☒

Administration

For the building or buildings to be removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per [Section 130061 \(c\)\(2\)\(A\)](#)

The planned uses of the building or buildings to be removed from acute care service per [Section 130061\(c\)\(2\)\(B\)](#)

The inpatient service currently delivered in the building or buildings per [Section 130061\(c\)\(20\)\(C\)](#)

Building Number:

05

East Pavilion

Removal  
Date:

01/01/2030

Planned Uses for the building to be removed from acute care service:

Planned use for building:

Medical Office Building

Jurisdiction:

OSHPD

Inpatient services currently delivered in the building:

☒

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☒

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☒Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☒Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐Nuclear  
Medicine☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Administration

☐

Skilled Nursing

☐☒

Report Year:

2010

10943

Stanford Hospital

Palo Alto

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Report whether the general acute care services and beds will be relocated to a new or retrofittd building and any corresponding building sites or project numbers per [Section 130061\(c\)\(2\)\(E\)](#)

Building  
Number:

02

Building Name:

Central Core - East and West

Will general acutr care services and beds will be relocated to a new or retrofittd building?

ClinicalLab

Relocated to other building

[New Building](#) [Bed Count](#) [RetroFitted Building](#) [Bed Count](#) [Other SPC2-SPC5 Building](#) [Bed Count](#)

10-Diagnostic Treatment Center

Building  
Number:

02

Building Name:

Central Core - East and West

Will general acutr care services and beds will be relocated to a new or retrofittd building?

Administration

Relocated to new &amp; other Building

[New Building](#) [Bed Count](#) [RetroFitted Building](#) [Bed Count](#) [Other SPC2-SPC5 Building](#) [Bed Count](#)

N\_1-New Stanford Hospital Bldg

06-Phase 1 Central Core Expansion

Facility Status Number	Project Number	Sub Num	Scope	Date in	Plan Approved Date	Proj. Start Date	Proj. Completed Date	
10943	IS081923	0	PPR - REPLACEMENT HOSPITAL AND ADDITION	10/24/2008		03/01/2013	01/01/2018	OPEN

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

02

Building Name:

Central Core - East and West

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☒

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☒

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☐

Central Plant

☒Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

03

Building Name:

Boswell Building

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☒

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☐

Central Plant

☒Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

15

Building Name:

Lane Building - Med School

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☐

Central Plant

☐Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

16

Building Name:

Edwards Building-Med School

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☐

Central Plant

☐Support  
Services



Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

17

Building Name:

Alway Building - Med School

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☐

Central Plant

☐Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

18

Building Name:

Grant Building - Med School

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☐

Central Plant

☐Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

20

Building Name:

Boiler Building

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☒

Central Plant

☐Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

20A

Building Name:

Boiler Building - Office Portion

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☒

Central Plant

☐Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

21

Building Name:

Cooling Tower #3

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☒

Central Plant

☐Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

23

Building Name:

Cooling Tower #1

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☒

Central Plant

☐Support  
Services

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number:

24

Building Name:

Cooling Tower #2

### Type of Service Provided

☐

Nursing

☐

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postprtum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☐Radiological/  
Imaging☐

Pharmaceutical

☐

Dietetic

☐

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐Nuclear  
Medicine☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☒

Central Plant

☐Support  
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

01

Building Name:

Central Core

Configuration  
:

Remove from GAC service by 1/1/2030

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☒

Clinical Lab

☐Newborn/  
WellBaby☒Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☒

Dietetic

☒

Nuclear Medicine

☒Support  
Services☐

Skilled Nursing

☒

Administration

☒

Nuclear Medicine

☒Support  
Services



Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

02

Building Name:

Central Core - East and West

Configuration  
:

Remove from GAC service by 1/1/2020

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☒

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☒Support  
Services☐Intermediate  
Care☐

Dietetic

☒

Administration

☐

Skilled Nursing

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

03

Building Name:

Boswell Building

Configuration

:

Remove from GAC service by 1/1/2020

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☒Support  
Services☐Intermediate  
Care☐

Dietetic

☒

Administration

☐

Skilled Nursing

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

04

Building Name:

West Pavilion

Configuration  
:

Remove from GAC service by 1/1/2030

**Type of Service Provided**☒

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☒Intermediate  
Care☐

Dietetic

☐

Nuclear Medicine

☒Support  
Services☐

Skilled Nursing

☒

Administration

☐

Nuclear Medicine

☒Support  
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

05

Building Name:

East Pavilion

Configuration  
:

Remove from GAC service by 1/1/2030

**Type of Service Provided**☒

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☒

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☒Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☒Psychiatric  
Nursing☐Radiological/  
Imaging☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Emergency

☐

Central Plant

☐Intermediate  
Care☐

Dietetic

☐

Nuclear Medicine

☒Support  
Services☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

06

Building Name:

Phase 1 Central Core Expansion

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☒

IntensiveCare

☐Pediatric/Adol  
escent☐Psychiatric  
Nursing☐Obstetrical  
Ante/Postpartum☐Intermediate  
Care☐

Skilled Nursing

☐

Surgical

☐

Anesthesia

☐

Clinical Lab

☒Radiological/  
Imaging☒

Pharmaceutical

☐

Dietetic

☒

Administration

☐Obstetrical  
Cesarean/Deliv☐Obstetrical  
Recovery☐Newborn/  
WellBaby☐

Emergency

☐

Nuclear Medicine

☐Rehabilitation  
Therapy☐

Renal Dialysis

☐Outpatient  
Surgery☐

Central Plant

☒Support  
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

07

Building Name:

Nursing Pod D

Configuration

:

N/A

**Type of Service Provided**☒

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☒

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐☐

Administration

☐

Skilled Nursing

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

08

Building Name:

Nursing Pod E

Configuration

:

N/A

**Type of Service Provided**☒

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☒

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Nuclear Medicine

☐Support  
Services☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

09

Building Name:

Nursing Pod F

Configuration

:

N/A

**Type of Service Provided**☒

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration



Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

10

Building Name:

Diagnostic Treatment Center

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☒

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☒

Anesthesia

☐Obstetrical  
Recovery☒

Renal Dialysis

☐Pediatric/Adol  
escent☒

Clinical Lab

☐Newborn/  
WellBaby☒Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Nuclear Medicine

☒Support  
Services☐

Skilled Nursing

☐

Administration

☐

Nuclear Medicine

☒Support  
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

11

Building Name:

Atrium

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐☐

Administration

☐

Skilled Nursing

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

12

Building Name:

F Pod Extension

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☒Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Administration

☐

Skilled Nursing

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

13

Building Name:

NMR Building

Configuration  
:

Remove from GAC service by 1/1/2020

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☒Radiological/  
Imaging☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Emergency

☐

Central Plant

☐Intermediate  
Care☐

Dietetic

☐

Nuclear Medicine

☐Support  
Services☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

15

Building Name:

Lane Building - Med School

Configuration  
:

Remove from GAC service by 1/1/2020

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Administration

☐

Skilled Nursing

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

16

Building Name:

Edwards Building-Med School

Configuration  
:

Remove from GAC service by 1/1/2020

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

17

Building Name:

Alway Building - Med School

Configuration  
:

Remove from GAC service by 1/1/2020

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Administration

☐

Skilled Nursing

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

18

Building Name:

Grant Building - Med School

Configuration  
:

Remove from GAC service by 1/1/2020

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☐

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐☐

Administration

☐

Skilled Nursing



Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

19

Building Name:

Cogen Building

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

19A

Building Name:

Cogen Building - Office &amp; Control R

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

20

Building Name:

Boiler Building

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

20A

Building Name:

Boiler Building - Office Portion

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

21

Building Name:

Cooling Tower #3

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postprtum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

22

Building Name:

Cooling Tower #4

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

23

Building Name:

Cooling Tower #1

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number:

24

Building Name:

Cooling Tower #2

Configuration

:

N/A

**Type of Service Provided**☐

Nursing

☐

Surgical

☐Obstetrical  
Cesarean/Deliv☐Rehabilitation  
Therapy☐

IntensiveCare

☐

Anesthesia

☐Obstetrical  
Recovery☐

Renal Dialysis

☐Pediatric/Adol  
escent☐

Clinical Lab

☐Newborn/  
WellBaby☐Outpatient  
Surgery☐Psychiatric  
Nursing☐Radiological/  
Imaging☐

Emergency

☒

Central Plant

☐Obstetrical  
Ante/Postpartum☐

Pharmaceutical

☐

Nuclear Medicine

☐Support  
Services☐Intermediate  
Care☐

Dietetic

☐

Skilled Nursing

☐

Administration



Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 01

Building Name: Central Core

**Type of Service Provided**

<input type="checkbox"/> Nursing	Inpatient Beds	<input type="text" value="0"/>	<input type="checkbox"/> Surgical	<input type="checkbox"/> Obstetrical Cesarean/Deliv	<input type="checkbox"/> Rehabilitation Therapy
<input type="checkbox"/> IntensiveCare	Inpatient Beds	<input type="text" value="0"/>	<input type="checkbox"/> Anesthesia		
<input type="checkbox"/> Pediatric/Adol escent	Inpatient Beds	<input type="text" value="0"/>	<input checked="" type="checkbox"/> Clinical Lab	<input type="checkbox"/> Obstetrical Recovery	<input type="checkbox"/> Renal Dialysis
<input type="checkbox"/> Psychiatric Nursing	Inpatient Beds	<input type="text" value="0"/>	<input type="checkbox"/> Radiological/ Imaging	<input type="checkbox"/> Newborn/ WellBaby	<input checked="" type="checkbox"/> Outpatient Surgery
<input type="checkbox"/> Obstetrical Ante/Postprtum	Inpatient Beds	<input type="text" value="0"/>	<input type="checkbox"/> Pharmaceutical	<input type="checkbox"/> Emergency	<input type="checkbox"/> Central Plant
<input type="checkbox"/> Intermediate Care	Inpatient Beds	<input type="text" value="0"/>	<input checked="" type="checkbox"/> Dietetic	<input checked="" type="checkbox"/> Nuclear Medicine	<input checked="" type="checkbox"/> Support Services
<input type="checkbox"/> Skilled Nursing	Inpatient Beds	<input type="text" value="0"/>	<input checked="" type="checkbox"/> Administration		
Total Beds this Building		<input type="text" value="0"/>			

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 04

Building Name: West Pavilion

**Type of Service Provided**
☒ Nursing Inpatient Beds 142

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric Inpatient  
Nursing Beds 0

☐ Obstetrical Inpatient  
Ante/Postprtum Beds 0

☒ Intermediate Inpatient  
Care Beds 17

☐ Skilled Nursing Inpatient  
Beds 0

Total Beds this Building 159

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 05

Building Name: East Pavilion

**Type of Service Provided**
☒ Nursing Inpatient Beds 67

☒ IntensiveCare Inpatient Beds 8

☒ Pediatric/Adol  
escent Inpatient Beds 26

☒ Psychiatric  
Nursing Inpatient Beds 30

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 131

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 06

Building Name: Phase 1 Central Core Expansion

**Type of Service Provided**

<input type="checkbox"/> Nursing	Inpatient Beds	<input type="text" value="0"/>	<input type="checkbox"/> Surgical	<input type="checkbox"/> Obstetrical Cesarean/Deliv	<input type="checkbox"/> Rehabilitation Therapy
<input checked="" type="checkbox"/> IntensiveCare	Inpatient Beds	<input type="text" value="25"/>	<input type="checkbox"/> Anesthesia		
<input type="checkbox"/> Pediatric/Adol escent	Inpatient Beds	<input type="text" value="0"/>	<input type="checkbox"/> Clinical Lab	<input type="checkbox"/> Obstetrical Recovery	<input type="checkbox"/> Renal Dialysis
<input type="checkbox"/> Psychiatric Nursing	Inpatient Beds	<input type="text" value="0"/>	<input checked="" type="checkbox"/> Radiological/ Imaging	<input type="checkbox"/> Newborn/ WellBaby	<input type="checkbox"/> Outpatient Surgery
<input type="checkbox"/> Obstetrical Ante/Postprtum	Inpatient Beds	<input type="text" value="0"/>	<input checked="" type="checkbox"/> Pharmaceutical	<input type="checkbox"/> Emergency	<input type="checkbox"/> Central Plant
<input type="checkbox"/> Intermediate Care	Inpatient Beds	<input type="text" value="0"/>	<input type="checkbox"/> Dietetic	<input type="checkbox"/> Nuclear Medicine	<input checked="" type="checkbox"/> Support Services
<input type="checkbox"/> Skilled Nursing	Inpatient Beds	<input type="text" value="0"/>	<input checked="" type="checkbox"/> Administration		
Total Beds this Building		<input type="text" value="25"/>			

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 07

Building Name: Nursing Pod D

**Type of Service Provided**
☒ Nursing Inpatient Beds 80

☒ IntensiveCare Inpatient Beds 18

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 98

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 08

Building Name: Nursing Pod E

**Type of Service Provided**
☒ Nursing Inpatient Beds 74

☒ IntensiveCare Inpatient Beds 24

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 98

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 09

Building Name: Nursing Pod F

**Type of Service Provided**
☒ Nursing Inpatient Beds 102

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 102

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 10

Building Name: Diagnostic Treatment Center

**Type of Service Provided**
☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 0

☒ Surgical

☒ Anesthesia

☒ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☒ Renal Dialysis

☒ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services



Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 11

Building Name: Atrium

**Type of Service Provided**
☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

12

Building Name:

F Pod Extension

**Type of Service Provided**
☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☒ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 13

Building Name: NMR Building

**Type of Service Provided**
☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric Inpatient  
Nursing Beds 0

☐ Obstetrical Inpatient  
Ante/Postprtum Beds 0

☐ Intermediate Inpatient  
Care Beds 0

☐ Skilled Nursing Inpatient  
Beds 0

Total Beds this Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☒ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☐ Central Plant

☐ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 19

Building Name: Cogen Building

**Type of Service Provided**
☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☒ Central Plant

☐ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 19A

Building Name: Cogen Building - Office &amp; Control R

**Type of Service Provided**
☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☒ Central Plant

☐ Support  
Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number: 22

Building Name: Cooling Tower #4

**Type of Service Provided**
☐ Nursing Inpatient Beds 0

☐ IntensiveCare Inpatient Beds 0

☐ Pediatric/Adol  
escent Inpatient Beds 0

☐ Psychiatric  
Nursing Inpatient Beds 0

☐ Obstetrical  
Ante/Postprtum Inpatient Beds 0

☐ Intermediate  
Care Inpatient Beds 0

☐ Skilled Nursing  
Inpatient Beds 0

 Total Beds this  
Building 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/  
Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical  
Cesarean/Deliv

☐ Obstetrical  
Recovery

☐ Newborn/  
WellBaby

☐ Emergency

☐ Nuclear  
Medicine

☐ Rehabilitation  
Therapy

☐ Renal Dialysis

☐ Outpatient  
Surgery

☒ Central Plant

☐ Support  
Services

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

01

Building Name:

Central Core

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

04

Building Name:

West Pavilion

**Medical / Surgical (Include GYN)**Inpatient  
Bed

142

Inpatient  
Days

34827

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

17

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

159

**Total Beds this  
Building Per  
Service**

159



Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

05

Building Name:

East Pavilion

**Medical / Surgical (Include GYN)**Inpatient  
Bed

67

Inpatient  
Days

9796

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

30

Inpatient  
Days

8838

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

26

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

8

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

131

**Total Beds this  
Building Per  
Service**

131

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

06

Building Name:

Phase 1 Central Core Expansion

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

25

Inpatient  
Days

7395

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

25

**Total Beds this  
Building Per  
Service**

25

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

07

Building Name:

Nursing Pod D

**Medical / Surgical (Include GYN)**Inpatient  
Bed

80

Inpatient  
Days

24624

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

10

Inpatient  
Days

2869

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

8

Inpatient  
Days

2149

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

98

**Total Beds this  
Building Per  
Service**

98

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

08

Building Name:

Nursing Pod E

**Medical / Surgical (Include GYN)**Inpatient  
Bed

74

Inpatient  
Days

22473

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

24

Inpatient  
Days

6580

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

98

**Total Beds this  
Building Per  
Service**

98

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

09

Building Name:

Nursing Pod F

**Medical / Surgical (Include GYN)**Inpatient  
Bed

102

Inpatient  
Days

14549

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

102

**Total Beds this  
Building Per  
Service**

102

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

10

Building Name:

Diagnostic Treatment Center

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

11

Building Name:

Atrium

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

12

Building Name:

F Pod Extension

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0



Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

13

Building Name:

NMR Building

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

19

Building Name:

Cogen Building

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

19A

Building Name:

Cogen Building - Office &amp; Control R

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per [Section 130061\(e\)](#)

Building Number:

22

Building Name:

Cooling Tower #4

**Medical / Surgical (Include GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Respiratory Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Acute Psychiatric**Inpatient  
Bed

0

Inpatient  
Days

0

**Perinatal (exclude Newborn / GYN)**Inpatient  
Bed

0

Inpatient  
Days

0

**Burn**Inpatient  
Bed

0

Inpatient  
Days

0

**Skilled Nursing**Inpatient  
Bed

0

Inpatient  
Days

0

**Pediatric**Inpatient  
Bed

0

Inpatient  
Days

0

**intensive Care Newborn  
Nursery**Inpatient  
Bed

0

Inpatient  
Days

0

**Intermediate Card**Inpatient  
Bed

0

Inpatient  
Days

0

**Intensive Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Rehabilitation  
Center**Inpatient  
Bed

0

Inpatient  
Days

0

**Int. Care / development  
Disabled**Inpatient  
Bed

0

Inpatient  
Days

0

**Coronary Care**Inpatient  
Bed

0

Inpatient  
Days

0

**Chemical  
Dependency**Inpatient  
Bed

0

Inpatient  
Days

0

**Total Beds this  
Building Per  
Unit**

0

**Total Beds this  
Building Per  
Service**

0